

NAME \_\_\_\_\_  
 (Last) (First) (Middle)

**CURRENT ADDRESS** \_\_\_\_\_  
#                      **Street**    **Apt.#**

**PREVIOUS ADDRESS** \_\_\_\_\_  
(if at current less than 2 years)#      Street      Apt.#

NAME OF BUSINESS \_\_\_\_\_

**EMPLOYER** \_\_\_\_\_

**TELEPHONE NUMBERS:**  
HOME (\_\_\_\_) \_\_\_\_\_ WORK (\_\_\_\_) \_\_\_\_\_

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**VEHICLE INFORMATION:**

**YEAR** \_\_\_\_\_ **MAKE** \_\_\_\_\_ **MODEL** \_\_\_\_\_

**COLOR** \_\_\_\_\_ **LICENSE NO.** \_\_\_\_\_ **STATE** \_\_\_\_\_

**CRIMINAL RECORD:**

1. Have you ever been charged with or convicted of a felony ? YES NO

If yes, explain. \_\_\_\_\_

\_\_\_\_\_

2. Have you ever been charged with or convicted of any crime involving the manufacture, sale, possession, or use of drugs/narcotics ? YES NO

If yes, explain. \_\_\_\_\_

\_\_\_\_\_

3. Have you ever been charged with or convicted of any crime involving moral turpitude ? YES NO

If yes, explain. \_\_\_\_\_

\_\_\_\_\_

4. Have you ever been charged with or convicted of any crime involving fraud or misrepresentation ? YES NO

If yes, explain. \_\_\_\_\_

\_\_\_\_\_

5. Have you ever been charged with or convicted of any crime involving threats (either expressed or implied), or of coercion as inducement to make a sale ? YES NO

If yes, explain. \_\_\_\_\_

\_\_\_\_\_

6. Do you have any contagious, infectious, or communicable diseases ?  
YES NO

If yes, explain. \_\_\_\_\_

\_\_\_\_\_

Location of the manufacturer of goods/products to be sold : \_\_\_\_\_

\_\_\_\_\_

Location of goods/products to be sold at time of filing application : \_\_\_\_\_

\_\_\_\_\_

Proposed method of delivery of goods/products : \_\_\_\_\_

\_\_\_\_\_

Please list two character references : (preferably local)

1. \_\_\_\_\_  
Name Address Telephone

2. \_\_\_\_\_  
Name Address Telephone

I swear (affirm) that all of the preceding information is true and correct to the best of my knowledge.

I understand that it is unlawful and in violation of Ordinance 479, Falls Church City Code, if any statements on this application are found to be false and shall constitute grounds for denial of the application or revocation of a permit.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

Subscribed and sworn before me on this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

\_\_\_\_\_  
(Notary Public)

My commission expires \_\_\_\_\_